

Foster Family Home - Corrective Action Report

Provider ID: 1-510992

Home Name: Lucrecia Baptista, CNA

Review ID: 1-510992-4

91-140 Hailipo Street

Reviewer: David Ayling

Ewa Beach HI 96706

Begin Date: 10/15/2018

End Date: 10/15/18

Foster Family Home

Required Certificate

[17-1454-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

Home visit for a 3 person CCFFH recertification review made on 10/15/18.

6.(d)(1) - Home in compliance with all requirements. Home will receive a 2 year 3 bed certification.

DA David Ayling Rv
Compliance Manager

Lucrecia Baptista
Primary Care Giver

10/15/18
Date

10/15/18
Date